
**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

17

Application Number	10/643,624
Filing Date	August 18, 2003
First Named Inventor	MORI, Akihiro
Art Unit	2186
Examiner Name	Unassigned
Total Number of Pages in This Submission	17
Attorney Docket Number	16869K-090500US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Preliminary Amendment (7 pages)	<input checked="" type="checkbox"/> Petition to Make Special (7 pages)	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Seven (7) Cited References
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

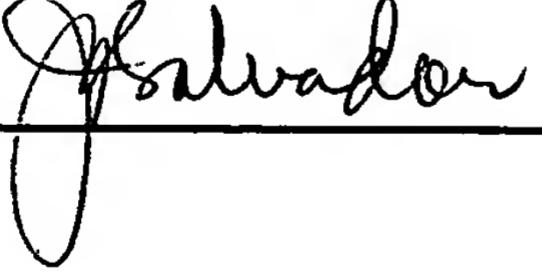
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP	Reg. No. 41,405
Signature		
Date	September 10, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Joy Salvador		
Signature		Date	September 10, 2004